

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		960296.98458
First Named Inventor		Milo M.K. Martin
<b>COMPLETE IF KNOWN</b>		
Application Number		
Filing Date		October 18, 2001
Group Art Unit		
Examiner Name		

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BANDWIDTH-ADAPTIVE, HYBRID, CACHE-COHERENCE PROTOCOL

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)   as United States Application Number or PCT International

Application Number   and was amended on (MM/DD/YYYY)   (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

**Burden Hour Statement** This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U S Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number   OR  Correspondence address below

Name **27114**  
PATENT TRADEMARK OFFICE

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR :**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Milo M.K.	Family Name Martin or Surname
---	-----------	----------------------------------

Inventor's Signature	Date
-------------------------	------

Residence: City Madison	State WI	Country U.S.	Citizenship U.S.
----------------------------	-------------	-----------------	---------------------

Mailing Address 1212 Vilas Avenue, #1

Mailing Address

City Madison	State WI	ZIP 53715	Country U.S.
-----------------	-------------	--------------	-----------------

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name Sorin or Surname
---	---------------------------------

Inventor's Signature	Date
-------------------------	------

Residence: City Madison	State WI	Country U.S.	Citizenship U.S.
----------------------------	-------------	-----------------	---------------------

Mailing Address 1015 Grant Street, #3

Mailing Address

City Madison	State WI	ZIP 53711	Country U.S.
-----------------	-------------	--------------	-----------------

Additional inventors are being named on the Onesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → **[+]**

PTO/SB/02A (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

U S Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

<b>Name of Additional Joint Inventor, if any:</b>		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Mark D.		Hill	
Inventor's Signature		Date	
Residence: City	Madison	State	WI
Country	U.S.	Citizenship	U.S.
Mailing Address 2124 Chamberlain Avenue			
Mailing Address			
City	Madison	State	WI
ZIP	53705-3970	Country	U.S.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
David A		Wood	
Inventor's Signature		Date	
Residence: City	Madison	State	WI
Country	U.S.	Citizenship	U.S.
Mailing Address 2115 Bascom Street			
Mailing Address			
City	Madison	State	WI
ZIP	53705	Country	U.S.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.